

The Commonwealth of Massachusetts

ANNUAL REPORT

OF THE

TRUSTEES OF THE DANVERS
STATE HOSPITAL

FOR THE

YEAR ENDING NOVEMBER 30, 1924

DEPARTMENT OF MENTAL DISEASES



OFFICERS
OF THE
DANVERS STATE HOSPITAL

NOVEMBER 30, 1924

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EDGAR MAULE BLEW, M.D., *Assistant Superintendent*
OTIS F. KELLY, M.D., *Senior Assistant Physician in Pathology*
GUY C. RANDALL, M.D., *Senior Assistant Physician*
CHARLES L. CLAY, M.D., *Senior Assistant Physician*
J. CHARLES S. LAPIERRE, M.D., *Assistant Physician*
LILLIAN G. MOULTON, M.D., *Female Assistant Physician*
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Mr. ARTHUR E. REED, *Supervisor Male Department*
Miss OLIVE F. ESTEY, R.N., *Superintendent of Nurses and Principal of Training School*
Mrs. HARRIET A. READ, R.N., *Supervisor, Female Department*
Mr. SAMUEL A. CLARK, *Chief Engineer*
Mr. WILLIAM W. GORDON, *Head Farmer*
Mr. CARLETON B. MOSHER, *Foreman Mechanic*

Ophthalmologist.—PHILIP R. DWYER, M.D., *Salem*
Dentist.—M. N. MOORADKANIAN, D.M.D., *Lawrence*
Industry Teacher.—Miss EDITH F. BEANE

The Commonwealth of Massachusetts

TRUSTEES' REPORT

To His Excellency the Governor and the Honorable Council.

In submitting the forty-seventh Annual Report of the Danvers State Hospital, the Trustees take pleasure in stating that the institution has continued to enjoy the confidence of the public, and that the need of service to the sick in the hospital, as well as to those under supervision outside, and to the Community, has been up to the high standards and best traditions of the hospital.

FINANCIAL STATUS

The fiscal year, ending November 30, 1924, finds us free of unadjustable deficits.

INCREASE OF POPULATION

The hospital year, which ended September 30, 1924, has been one of the busiest in the history of the institution. Our population has increased greatly. Transfer of patients to other institutions was necessary, though, oftentimes, difficult to effect by reason of objections of relatives who might find it difficult to visit them at more distant institutions.

Admissions for the year were 735, an increase of 81 over the previous year. The daily average population was 1689, an increase of 45. The whole number of cases treated was 2775,—124 more than the preceding year.

The growth of population in the period between 1917 and 1924 is as follows:

YEAR	Daily average no. of patients under treatment
1917.....	1488
1918.....	1502
1919.....	1486
1920.....	1522
1921.....	1576
1922.....	1631
1923.....	1644
1924.....	1689

The need of additional accommodation for patients is obvious.

NEEDS

Our requests this year are confined to what we believe to be essential needs, in the way of renewals, additional equipment and new construction.

Long Distance Recording Altitude Gauge—\$420.90

To enable the watch engineer, at the New Power Station, to know at all times the water level maintained in the stand-pipe on the hill. The efficiency of our sprinkler system and other services at the Main Hospital depend upon the condition of the Stand-pipe Service.

Long Distance Vacuum Gauge—\$420.90

To enable the engineer at the power plant to know if proper vacuum is being maintained on the heating system of the hospital. We recommend the installation of a Bristol long distance recording Vacuum Gauge, electrically operated, in the engine room.

Repairing Service Water Stand-pipe—\$562.60

Coating the inside of the Service water Stand-pipe with Hermastic enamel to prevent pitting and corrosion.

Replacing Coffee & Tea Urns—\$1200.00

One coffee and one tea urn, capacity, 110 gallons each, in the patients' congregate dining room are practically worn out and must be replaced.

Replacing Insulated Tea and Coffee Cans (used for employees)—\$500.00

These are used for making coffee and tea for employees, in the main dining room, and are of 15 gallon capacity each. Those now in use are worn out.

Metal Washing Machine for Laundry—\$3500.00

To replace an old wooden washer now worn out.

DeLaval Milking Machine—\$2199.00

To replace old B. L. K. Milking Machine which is old and unsatisfactory.

Moving Dayton Hall Cottage to the foot of the Hospital, and alterations and construction necessary to fit it for use as officers' quarters and rooms for help—\$3467.75.

Dayton Hall is located near the filter-beds, and was formerly occupied by the man in charge of the filter-beds, his wife who served as matron, and a detail of patients. The filter system is now looked after by a special attendant and a detail of patients from the hospital. The cottage has been closed up and its distance from the Hospital makes it impractical for occupancy in its present location. It should be moved to a point at the walk up the hill to the Hospital, and equipped for use as quarters for officers and employees. The building will soon deteriorate unless occupied.

Automatic Draft Control for Boilers—\$2438.00

Operation of boilers has shown necessity of automatic draft control in order to prevent swings to high draft over the fires in order to conserve on coal, and to prevent rapid depreciation of fire brick such as obtains under the present system of hand regulation of drafts.

We desire to call attention to the need of a modern kitchen and bakery, and an industrial and occupational building. The Department has made a tentative study of the Rear Center building, with the purpose of determining the best way to use spaces formerly used as store rooms and now in disuse because of their situation.

The proposed changes include the erection of a kitchen and bakery on the site of the old power plant and the extension of the Rear Center building to the proposed Kitchen building. This would provide adequate room for laboratories, admission room, dental office, patients' library, and enlarging the congregate dining room to meet the conditions imposed by an increased population.

To these needs, we respectfully beg your consideration.

In conclusion, we desire to express our confidence in the Executive Officer and his Assistants, and our appreciation of the faithful services of officers and employees during the year.

Respectfully submitted,

S. HERBERT WILKINS,	WILLIAM W. LAWS,
ARTHUR C. NASON, M.D.,	LOUISE M. PORTER,
JAMES F. INGRAHAM,	ANNA P. MARSH,
SAMUEL COLE.	

SUPERINTENDENT'S REPORT

To the Trustees of the Danvers State Hospital

The forty-seventh annual report of the Superintendent, covering the operation of the hospital for the fiscal year ending November 30, 1924, is respectfully submitted.

The clinical reports and statistics relating to patients are for the period included within the year ending Sept. 30, 1924.

MOVEMENT OF POPULATION

The hospital year began October 1, 1923, with 1651 patients in the hospital, 346 on visit, 27 on escape, and 16 in family care, a total of 2040, and an increase of 43 over the preceding year.

The year ended September 30, 1924, with 1721 patients in the hospital, 313 on visit, 27 on escape, and 18 in family care, a total of 2079.

Admissions for the year numbered 735, a total of 81 more than the previous year. Admissions of men showed an increase of 39 as compared with last year, and an increase of 42 women for the corresponding period.

Classified according to sex, the admissions were: males 391, and females, 344; for the preceding year, males 352, and females 302.

During the year there were no men or women admitted as voluntary patients, a decrease of three over the preceding year; 189 men and 160 women were admitted on temporary care papers, an increase of 20 for the year; and 13 men and 11 women were transferred from other institutions, an increase of 7.

FIRST ADMISSIONS

Admissions for the first time to this or any hospital were 561 as compared with 486 last year, an increase of 75.

DAILY POPULATION

The daily average population was 1689, an increase of 45. The whole number treated during the year was 2775,—214 more than the preceding year.

The death rate for the year was 221, as against 231 the preceding year, an average of .8 per cent on the basis of total number of cases under treatment.

DISMISSALS

There were 696 dismissed during the year, 371 men and 325 women.

There were discharged as recovered 56 patients as compared with 26 patients in 1923; as improved 242, as against 264 last year; as not improved 66, as compared with 27 in 1923; and as not insane 33, as compared with 26 in 1923.

At the end of the year there were 313 patients on trial visit in care of friends or under hospital supervision as compared with 346 at the end of the previous year.

Since the organization of the hospital 25,276 patients have been admitted and 23,197 discharged.

In this connection a comparison of statistics with those of previous years should prove interesting:—

Hospital year	Total Adms.	First Adms.	Average Daily Population	Total cases treated during the year
1917	766	533	1488	2554
1918	734	480	1502	2490
1919	738	509	1486	2567
1920	645	492	1522	2489
1921	668	500	1576	2579
1922	729	547	1631	2569
1923	654	486	1642	2561
1924	735	561	1689	2775

THE NEED OF PSYCHOPATHIC WARDS OR ACUTE RECEIVING HOSPITAL

The progressive increase in "average daily population," and "total cases treated during year" since 1920, denotes the rate of increase of that class of institutional inmates known as permanent residents or custodial cases. It includes the senile, arteriosclerotic, terminal dementia, and other conditions of a chronic, or progressively dementing character. In time, this bids fairly to change the character of the institution, unless some provision is made for the care of this class by additions to our housing capacity, or by transfers to other institutions. Danvers cannot function successfully as an acute receiving hospital when classification is rendered almost impossible by an overwhelming surplus of custodial inmates.

Our district sends us between 500 and 560 cases of "first admissions to this or any hospital," yearly. A very large number of these patients suffer from acute disorders, and may be helped to mental restoration. From this group, the largest number of our discharges are made. Special classification, special care and special attention are necessary in these cases in order to ensure the best results.

The interests of this class of patients can be served properly only by the addition to the institution of acute or receiving wards in a separate building, with a capacity of between 400 and 500 beds.

MEDICAL EXAMINER'S CASES

Identification number 24842; male; age 43; died March 24, 1924. Cause of death, "traumatic shock from compound fractures of left leg and foot, sacral spine and ilia sustained in jumping from the roof (about 80 feet high) with suicidal intent." (Medical Examiner's Report.) Patient was a parietic, depressed, and extremely apprehensive as a consequence of hallucinations. Prior to admission had attempted to drown himself. Was kept in observation ward until March 24, when as a consequence of the urging and insistence of his brother that the patient be allowed some light exercise outdoors, he was detailed to go out with a group of patients who picked up papers and litter thrown out of the windows of the buildings. Suddenly he

ran from the detail and climbed the fire escape to the roof above the J wards, followed by the attendant as far as the top of the fire escape. The attendant was unable to catch up with him on the fire escape and did not attempt to climb the slippery slate roof. There he remained until 4 o'clock in the afternoon, resisting the appeals of his wife and brother, who had been brought to the hospital, to descend, and standing up ready to jump whenever any attempt was made to climb up the roof towards him. His situation made it impossible to reach him without his observation. At 4 o'clock he leaped from the roof, landing in a life net held by attendants. He died a half hour afterward.

Identification number 25090; female; age 27; diagnosis "Manic Depressive, Mixed"; admitted July 5, 1924; died Oct. 25, 1924. Escaped from the hospital early in evening of Oct. 24, and although searching parties were out till 2 a. m. could not be found. About 6:12 a. m. she was killed by a train on the track of the Boston and Maine railway near Howe Station. The train men stated that she deliberately threw herself on the track a moment before the engine passed the spot where she had been standing. Medical Examiner's Report:—"She was struck by the train going towards Middleton at about 6:12 a. m. Body very much lacerated. She evidently committed suicide."

Identification number 24458; female; age 46; admitted August 15, 1923; died April 28, 1924; diagnosis "General Paralysis." Patient occupied one of two beds in a room with another. Both were confined to their beds. The roommate was not considered to be violent, but it appears became irritated by the other's restlessness and struck her on the head. This was witnessed by one of the patients in the ward who immediately called the nurse. This was at 10:30 a. m. At 12:44 p. m. she died. Autopsy showed extensive subdural hemorrhage. Medical Examiner's Report:—"Pneumonia of right lung. Subdural hemorrhage caused probably by a blow upon the right side of the head."

MEDICAL ADMINISTRATION

The following changes in the Staff personnel took place during the year:

APPOINTMENTS

Dr. J. Charles Lapierre, assistant physician, appointed June 3, 1924.

Dr. Paul Dufault, assistant physician, appointed August 12, 1924.

Dr. Herve Faubert, assistant physician, appointed October 8, 1924.

RESIGNATIONS

Dr. J. Charles Lapierre, assistant physician, resigned Jan. 31, 1924.

Dr. Heman L. Chase, assistant physician, resigned April 19, 1924.

Dr. Jean C. Miller, assistant physician, resigned Dec. 29, 1923.

Dr. Isadore Green, assistant physician, resigned June 1, 1924.

Dr. William Lahaise, assistant physician, resigned June 30, 1924.

STUDENT INTERNES

Undergraduates in medicine, as student internes during the summer vacation period, helped us greatly in our work. We are assured that this service is of great value to students, and we know that the hospital profits largely by the work done in the wards and laboratory, and by the stimulating influence of an eager, inquiring, ambitious group of students among the staff.

The names of those who served as student internes follow:

Miss Helen Smith, July 2, 1924 to Sept. 6, 1924.

Miss Ruth Kull, June 19, 1924 to Sept. 5, 1924.

Mr. J. Travis Bennett, June 6, 1924 to Sept. 22, 1924.

Mr. Chalmers Gemmill, June 6, 1924 to Sept. 10, 1924.

Mr. Eric H. Blank, July 2, 1924 to Sept. 11, 1924.

Mr. Clarence R. Pearson, June 29, 1924 to Sept. 11, 1924.

Mr. Benjamin Rones, June 13, 1924 to July 31, 1924.

PUBLIC SCHOOL CLINICS

These have been conducted by Dr. Guy C. Randall, with the assistance of a psychologist and a social worker of the hospital. This has become one of the most interesting and important community services conducted by the hospital. Its

value is recognized by teachers and parents, and the measure of public co-operation received by those conducting this work has been ample and inspiring. This token of confidence reflects credit upon the Chief of the Clinic whose conscientious efforts and tactful methods are hereby recognized.

REPORT OF SCHOOL CLINIC OCT. 1, 1923-SEPT. 30, 1924.

Total number of children examined, 158.

First Examination, 113.

Re-examination, 45.

No. referred by schools as three or more years retarded, 238.

No. disclosed to be actually three or more years retarded by our examination, 69.

No. of towns in which clinics were held for the first time, 3.

No. of towns in which clinics were held for the second time, 1.

No. of towns in which clinics were held for the third time, 2.

No. of towns in which clinics were held for the fourth time, 1.

No. of Special Classes established, 0.

No. of Special Classes continued, 4.

CLINICS FOR PATIENTS ON VISITS

Clinics for patients who have left the hospital on trial visits have been held weekly at Newburyport, Gloucester, Salem, Lawrence, Haverhill, Lynn and Malden. These have been conducted by the Superintendent, or his Assistant, and a social worker. It is gratifying to state that the attendance at these clinics has been very full, and that our out-patients recognize that these efforts in their behalf are helpful to them. The clinics are in fact meetings between the patient and the hospital, where the difficulties and troubles of the discharged patient are discussed to the end of finding the best solution of the problems in the patient's interest. Too often, unfortunately, we find ourselves up against problems of great complexity and difficulty, but the point is that the patient knows he has a friendly agency that is bound to help him towards restoration in society. And, in many cases, this constitutes the stimulus to self-confidence and restoration. In all these confidential conferences between patients and the hospital it is understood that the object is solely service to those who have been our patients. Domestic and social relations are freely studied. The means of help, correction and restoration are gone over carefully; and the influence of the hospital towards legitimate demands upon social agencies and private enterprises is enforced by visitations and studies by our social service workers.

We are justly proud of the fact that our patients resort to us for help in their troubles, and that in many instances we have been enabled to help them. This, after all, is the true standard by which we must measure the value of hospital service.

MENTAL HYGIENE CLINIC

A mental hygiene clinic was opened at the Lynn Hospital, in connection with that institution's Out-patient Department on March 5, 1924. This clinic is conducted under the direction of Dr. Edgar M. Blew. It is open one afternoon a week. The attendance and the sources from which cases are referred show the need and the importance of the work of this clinic in the community.

Total number of Clinics held, 27.

Total number of Cases, examined,

Male, 23.

Female, 10.

Total, 33.

Total number of visits made by the 33 cases to the Clinic, for consultation,

Male, 88.

Female, 37.

Total, 125.

Cases were referred from the following sources:—Associated Charities of Lynn; 10; Child Welfare House, 8; Parent or other relative, 7; S. P. C. C., 2; Physicians, 2; Public Health Nurse, 1; Overseers of Poor; 1; Lynn Hospital Tuberculosis Clinic, 1; Own initiative, 1; Total, 33.

The 33 cases were referred to the Clinic for one or more of the following reasons:—Mental Deficiency, 9; Conduct Disorder, 10; Enuresis, 4; Epilepsy, 1; Encephalitis Lethargica, 1; Endocrine Disorder, 2; Manic Depressive, 1; Psychopathic Personality, 1; For home adjustment, 1; Neurosis, 1; Undiagnosed, 2; Total, 33.

The hospital and the Chief of the Clinic are gratefully appreciative of the help and co-operation of those in charge of the Lynn Hospital, and the secretaries and workers of the welfare organizations.

MEDICAL WORK

The established methods of complete physical, neurological and mental examinations, followed by presentation at Staff Conference for purposes of discussion and general study and diagnosis, have been followed in all cases admitted. Practically all cases dismissed have appeared before the Staff before going out on visit or discharge. The medical and environmental aspects of each case are thoroughly considered.

Treatment of all syphilitic cases, Wassermann tests, typhoid and smallpox vaccinations have been carried out as routine work. All persons admitted are subjected to the Schick test and toxin-antitoxin immunity induced in susceptible cases.

Occupational work in the wards and class rooms has been carried on successfully during the year.

Special attention has been devoted to hydrotherapy.

DENTISTRY

Full time dental service has been rendered by Mesrop N. Mooradkian, D.M.D., who continues to hold the position of resident dentist. He is assisted in his work by a dental hygienist. The following is a report of the dental service rendered during the year:—Extractions, 945; Fillings, 1059; Prophylaxis, 1645; Treatments, 232; X-Rays, 20; Impressions, 33; Plates completed, 8; Root Canal Fillings, 1; Davis Crowns, 3; Treatments for Vincent's Angina, 28; Extractions under ether, 5; Miscellaneous, 272.

PATHOLOGIST'S REPORT

The following report of the work of the laboratory is submitted by the pathologist:

Seventy-three autopsies were performed in this hospital during the hospital year, an increase of eight over the previous. There were 221 deaths, and therefore 33% of the deceased came to autopsy, an increase of 5% over the previous year. Of the deaths among the male patients (109), 31.2% came to autopsy; of those among female patients (112), 34.8% came to autopsy. The character of the cases examined post mortem may be seen from the following list of ante-mortem diagnoses in the cases autopsied:—

Senile Dementia, 10 (One of these was a case of Alzheimer's disease, pre-senile dementia); Psychosis with Cerebral Arteriosclerosis, 16; General Paresis, 14; Cerebral Syphilis, 2; Huntington's Chorea, 1; Brain Tumor—in one of the cases clinically diagnosed "General Paresis" was found a brain tumor; Psychosis with Organic Brain Disease, 1; Alcoholic Psychosis, 2; Psychosis with Somatic Disease, 2; Manic Depressive Psychosis, 7; Dementia Praecox, 8; Psychosis with Epilepsy, 2; Psychosis with Mental Deficiency, 1; Unclassed, 7—of these one had (pathologically) senile dementia; one tuberculous enteritis and peritonitis; one a long standing hallucinosis, either alcoholic or dementia praecox; two possibly manic-depressive psychosis; one of these died of general infection with organisms of Vincent's Angina; one questionably general paresis; and one an obscure central nervous disease. Total, 73.

The routine work of clinical pathology (examination of blood, body excreta, pathological fluids, and bacteriological examinations) and also the X-Ray Department continue without notable incident.

The supervision of Basal Metabolic examinations, apparatus for which the hospital purchased during the year, has been placed in charge of the laboratory.

The pathologist again calls attention to the need of an additional laboratory assistant in the quota of employees of the hospital.

The following papers from the laboratory were published during the year:

"One Reason Why Alcoholic Abuse Aggravates Neurosyphilis," by Otis F. Kelly, M.D. Boston Medical and Surgical Journal, Vol. 190, No. 11, pp. 444-447, March 13, 1924.

"Acidophile Degeneration in Dementia Praecox," by Otis F. Kelly, M.D. American Journal of Psychiatry, Vol. III, No. 4, April, 1924.

"The Rapidly Disappearing State Hospital Pathologist," by Otis F. Kelly, M.D. Boston Medical and Surgical Journal, Vol. 191, No. 11, pp. 488-491, Sept. 11, 1924.

Respectfully submitted,

OTIS F. KELLY, M.D., *Pathologist.*

EX-SERVICE MEN

It is earnestly hoped that in the early future arrangements may be made for the care of all ex-service men in the Federal hospitals. The number admitted is quite large as may be seen by the subjoined table, the number removed to the Veterans' Bureau Hospital comparatively small.

EX-SERVICE MEN UNDER CARE

OCT. 1, 1923—SEPT. 30, 1924.

No. of First Admissions, 43; No. of Re-admissions, 12; No. of return Visits, 74; No. of Return Escapes, 10; No. Discharged, 47; No. Discharged by Death, 5; No. on Visit, 89; No. on Escape, 21; Total number in the hospital Oct. 1, 1923, 62; Total number admitted during the year, 139; Total number discharged during the year, 162; Total number in the hospital Sept. 30, 1924, 39; Total number under treatment during the year, 201.

Twenty-seven of number discharged were transferred to the U. S. V. H. at Northampton, Mass.

THE TRAINING SCHOOL FOR NURSES

The Superintendent of Nurses submits the following report:

To the Superintendent of the Danvers State Hospital.

I herewith submit the forty-seventh annual report of the Training School for Nurses.

The Graduating Class of 1924: one graduate, Bertha Mabel Mosher. School Personnel: Superintendent of Nurses, 1; Assistant Superintendent of Nurses, 1; Supervisor, Day, 1; Supervisor, Night, 1; Head Nurses, 3; Graduates of Danvers State Hospital—Head Nurses, 2; Graduates of other Schools, Day Nurses—Pupils, 15; Day Nurses—Attendants, 26; Night Nurses—Pupils, 5; Night Nurses—Attendants, 10; Intermediate pupils at Affiliating School, Boston City Hospital, 3;

December 1, 1924, our pupils were as follows:

Seniors, 4; Intermediates, 3; Juniors, 16; Total, 23.

Respectfully submitted,

OLIVE F. ESTEY, R.N., *Superintendent of Nurses.*

SOCIAL WORK

The following resume of the year's work has been submitted by Miss Beulah E. Smith, in charge of this department:

To the Superintendent.

I submit herewith the report of the social service department for the year ending November 30, 1924:

It has been said that the primary function of hospital social service is to make hospital treatment more effective. This is the function of social service in this hospital. However, the function of the hospital itself has been enlarged until, to its generally recognized work—the treatment of patients resident there—has been added the duties of community educator in health matters as well as community consultant. As the function of the hospital has broadened, so also has hospital social service assumed a greater variety of duties, so that now, in addition to the securing of medical and social histories on resident patients and the making of arrangements for their discharge into the community, we have supervision of patients on visit, service at clinics for patients on visit and the securing of histories for school clinics. This year the hospital has established a mental hygiene clinic in Lynn, and Social Service Department contributes its share toward this work.

In the different phases of supervision and clinic work we are still "making hospital treatment more effective," for a large number of our patients are leaving the hospital and resuming a more or less normal place in the community. Any service which is helping to educate the public to a better understanding of mental hygiene and a more rational and humane attitude toward the mentally ill or the persons who have been mentally ill, is, indeed, making treatment more effective and decreasing the possibility of the discharged patients having to return to the hospital.

Although the Social Service Department has had only one worker for nine out of the past twelve months, the number of new cases referred have shown an increase of more than 40 per cent over those of the preceding year, indicating that the need of this service is a growing rather than a decreasing one. Of these cases the great majority have been referred by physicians of this hospital. A total of 629 cases have been acted upon, 460 of which came to social service for the first time this year. Seventy were carried over as unfinished from the preceding year, and 99 cases had been known to social service in former years. Of these 629 cases 103 are being carried over into the next year as unfinished.

In 260 cases the principal reason for referring to the Social Service Department was to secure histories in order to aid in diagnosis. Histories were taken by the Social Service Department in approximately one third of the total number of patients admitted to the hospital for the year. 162 cases were referred for some special investigation, 48 for supervision, 44 for miscellaneous personal service and 21 for placement outside the hospital.

Of the problems presented, disease as a prime factor, leads with 313. Environmental difficulties were noted in 136 instances, the greatest under this group being friction with family and others which occurred 60 times. Personality difficulties were noted in 101 cases, the greatest of these being anti-social habits, which occurred in 69 instances. It is of special significance that anti-social habits and friction with family and others can, to a large extent, be remedied, and in the adjustment of these difficulties lies a great deal of the work of this department.

Clinics for patients on visit and others who wish to consult a hospital physician or social worker, are held in Gloucester, Haverhill, Lawrence, Lynn, Malden, Newburyport, Salem and notices are sent to all persons on visit living in these cities and surrounding towns. The actual personal attendance at these clinics has been about 30% of the persons to whom notices have been sent, and a large number of written replies are received. No attempt is made to enforce attendance at these clinics, consequently it may be concluded that most of the persons who attend do so because they have problems upon which they desire the advice of the physician or social worker.

While it has been impossible, even with the clinics, to follow up every patient on visit, an attempt has been made during the last eight months to see every patient at least once before the expiration of his year of visit and his final discharge. Our conclusion, based on these visits, is that almost every patient should have been visited shortly after he left the hospital. We hope this year to be able to give more careful and complete supervision of the patients—from 350 to 400—who are on visit from the hospital. We are also looking forward to the time when we may have a sufficiently large Social Service Staff so that the homes to which each patient goes may be visited and plans for the future discussed with the friends or family. At least this should be done with all patients who are considered sufficiently recovered so that they may be expected to take a normal or nearly normal place in the community.

What is the effect on the other members of a family, especially the children, of the presence in the home of a person who is mentally ill? We should like to attempt some special studies with the families of some of our patients. We should also like to make some special social studies of young persons under the age of eighteen who are being admitted to the hospital.

Social Service can function adequately only in a hospital where there is understanding and hearty co-operation of physicians. It is only because of the hearty support and co-operation of the Superintendent, physicians, and other hospital personnel that we have been able to go through this year, with two Social Workers for only three months and one for the other nine months, without very seriously

lowering the standard of work. I also wish to mention with grateful appreciation the assistance rendered by the Social Agencies of the community, also by the kindly individuals who have helped in so many ways.

SOCIAL SERVICE STATISTICS

I. Numerical Summary of Cases.

	Males	Females	Totals
New Cases.	241	219	460
Renewed Cases from previous years.	50	49	99
Continued Cases from previous year.	26	44	70
Total cases worked on for the year.	317	312	629
Cases closed during the year.	290	236	526
Cases continued to following year.	27	76	103

II. Sources of New Cases.

No. Cases referred by Physicians, 393; No. Cases referred by Community Agencies, 6; No. Cases referred by Initiative of Patients, 4; No. Cases selected by Social Service, 57.

III. Analysis of Work.

1. Purposes for which cases were referred:

(a) Histories of Patients { Taken at Hospital, 125
 Taken outside Hospital, 135

(b) Investigation { Conduct Disorders, 23
 Employment Situations, 12
 Home Conditions, 55
 Statements of Patients, 35
 Statements of Others, 37

(c) Supervision { In Home, 24
 In Industry, 5
 In Community, 19

(d) Personal Services, 44

(e) Placement, 21

2. Problems:

(a) Disease { Mental, 265
 Physical, 48

(b) Sex Problems { Prostitution, 2
 Promiscuity, 6
 Wayward Tendencies, 13

(c) Environment, 133

1. Financial Difficulties, 13

2. Employment Difficulties, 17

3. Unsuitable Surroundings, 22

4. Friction { Family, 54
 Others, 8

5. Marital Difficulties, 19

(d) Personality Problems, 101

1. Temperament, 28

2. Anti-social Habits, 69

2. Vacillating Interests, 4

(e) Educational Problems, 20

1. Readjustment Habits of Mind, 17

2. Recreation; church; social relationships, 3

(f) Legal Problems.

1. Concerning property or support, 5

2. Resulting from conduct of patient, 4

3. " " " " others, 2

IV. Service Rendered.

1. Medical:

- (a) Contribution of information re: Medical History, 273
- (b) " " " " Home Conditions, 65
- (c) " " " " Condition of Out Patients, 91
- (d) Arrangements for Medical Assistance, 15.

2. Social:

- (a) Adjustments for Patients { Environment, 9
Personal Relations, 18
- (b) " " " in Industry, 3
- (c) " " " Recreation, 2
- (d) Advice { To Relatives, 112
To Patients, 97
To Others, 42
- (e) Connecting with Agencies, 27; with Individuals, 7
- (f) Family Assistance { Legal, 3
Financial, 7
Miscellaneous, 3
- (g) Arrangements for further study or training, 1
- (h) Personal Services, 25
- Placement Work { Home, 21
Industry, 5

V. Supervision Work.

1. No. Patients on visit last day previous year, 395

- Visits { To Patients on ward, 112
" " " visit, 111
" Relatives or Friends, 270
" Social Agencies, 169
" Others, 142

No. Patients in care of Other Agencies, 8

2. Family Care Patients:

- (a) No. Patients visited, 50
- (b) " " placed, 3
- (c) " " replaced, 2
- (d) " " returned, 4
- (e) " " discharged, 0
- (f) " " Boarding Homes investigated, 5

VI. Clinic Work.

- 1. Hospital Clinics { No. clinics attended, 41
" interviews with Patients, 98
" " " Relatives, 59
- 2. School Clinics—No. Histories, 86
- 3. Community Clinics { No. attended, 27
" interviews with Patients, 8
" " " Others, 21

Special Features:

Lectures, 6

Conferences attended, 9

Respectfully submitted,
BEULAH E. SMITH, *Head Social Worker.*

NEW CONSTRUCTION AND REPAIRS

In addition to ordinary repairs, the institution has completed the following:
Renovation of stable for non-tubercular cows, purchased by the State for the hospital.

Installing drinking cups and ventilator system in same.

Construction of a dairy house and installation of equipment.

Excavation of cellar for vegetable Store House.

Repair and resurfacing of main avenue to hospital.

Completion of generator room at New Power House.

Installing water and steam lines through tunnel to dairy house.

LOSS OF ICE HOUSE

The old ice house at the Hospital Pond was lost by fire, Dec. 17, 1923. The building was located at a considerable distance from other dwellings, and the fire was not discovered till 3.30 A. M. when it had gained such headway that it was impossible to save the buildings, and when the Danvers fire apparatus arrived at the scene the roof and walls had fallen in. The boiler and boiler shed were saved. No clue could be obtained as to the origin of the fire.

Fortunately, our ice making equipment was in operation, and no embarrassment to the hospital service resulted from this loss. Sufficient ice is now cut to fill the small ice house at the Middleton Colony.

NEEDS

The time may not be opportune to ask for *additional buildings for the accommodation of patients*, but it is necessary to call attention to our great need in this respect.

The hospital population quota is 1745, and our yearly admission rate is about 800 patients. We discharge, yearly, on visit, improved, recovered, or under supervision about 400 patients, or approximately 50% of the number of admissions. By far the larger proportion of such discharges belong in the group of those who have been under treatment, under or within a twelve-month period.

There is no question but that the conditions for treating acute cases are not at their best where classification is almost impossible on account of the excessive number of chronic, incurable cases domiciled in the same wards with the acute cases.

Soon, the State must consider the question of an acute receiving building for Danvers. Properly considered, this should be an acute or infirmary building. We cannot do, as we should, for our acute sick without such an addition. At least one-half of our admissions during any year may be classified as acute cases. A building of a capacity to house 400 patients, then, is needed. In the interest of economy and the welfare of the sick it would be better still to make it a 500 bed hospital which would insure comfort and adequate quarters for our sick for many years, at the least cost.

At this time when so many public spirited individuals are interested in large expenditures in behalf of prisoners and prison improvements, it is a singular anomaly that the needs of the unfortunate sick, of the mental class, seem to be forgotten. These, the innocent victims of environmental and occasionally hereditary handicaps, have a claim upon public bounty and consideration in advance of all others. Let us heed the needs of such as these, in all our humane efforts.

A Modern Kitchen and Bakery, Including Renovation of the Rear Centre. With the changes consequent upon the removal of stores to the Service Building, much space remains unutilized in the Rear Centre. Many alterations are needed, as pointed out in previous reports, to put these spaces in condition for other much needed purposes.

It is desired that the main dining room be located on a ground floor, that the kitchen and bakery be located on the site of the old abandoned Power Plant, that the kitchen and bakery, on that site, be connected with the rear centre by an extension to the kitchen building, and the space thus gained be utilized for quarters for officers and employees, laboratory, dental rooms, library, patients' admitting rooms, enlarged congregate dining rooms, etc.

A separate building for occupational work, and a paintshop separated from other buildings, are needed.

Other needs, which are of the nature of repairs and improvements, are referred to in the Trustees' Report which was prepared in Council with the Superintendent.

FARM

The farm production was equal to the best in years. Much other work, such as road repairs, fell upon the farm force. The yield of hay, ensilage, etc., was above the average of other years.

RELIGIOUS SERVICES

Religious services were held regularly each Sunday, the Catholic clergyman officiating in the forenoons, and the Protestant clergyman in the afternoons. Religious

services were also held monthly at the Middleton Colony. Responses to sick calls, or to administer the rites of their religion to the dying, have been faithfully made by the clergy.

ACKNOWLEDGMENTS

The following friends of the hospital have contributed money towards entertainment of the patients, and to provide gifts at the Christmas season for those who had no friends to remember them:—Mrs. Martha L. Stearns, Melrose; Mr. E. B. Kiely, Lynn; Mr. Wm. L. Colclough, Malden; Mrs. Clara L. Giarla, Winthrop; Miss Josephine Byron, Salem; Mrs. Guy R. Wolfe, Gloucester; Mrs. Samuel W. Wolfe, Gloucester; Mr. Joseph Martin, Haverhill; Miss Mary Kelly, Boston; Mrs. Martha L. Stearns, Melrose; Miss Christine Kelly, Treas., Catholic Daughters of America, Danvers; Mr. Thomas Keppie, Lawrence; Miss Irene Murphy, Salem.

The following donations by friends of the hospital are gratefully acknowledged:—Universalist Ladies' Circle, Danvers, year's subscription to "National Geographic"; Mr. Gilman Brown, Hathorne, magazines; Mrs. Galen M. Bowditch, Chelsea, articles and cards; Mrs. A. H. Upton, Salem, box of food; Mr. and Mrs. G. O. Linberg, Springfield, victrola records; Miss Katharine P. Loring, Prides Crossing, book, "Torrington Hall"; Mrs. Madeleine Buffard, Brookline, books and pictures; Mrs. A. E. Liebsch, Salem, scrap books and post cards; Miss I. Roberts, Beachmont, clothing; Mrs. A. H. Burwell, Jamaica Plain, bungalow aprons; Mr. H. L. Colby, Beverly, magazines; Church Periodical Club, Boston, magazines and books; Mrs. Chas. M. Pike, Salisbury, magazines; Mr. Herbert W. Sylvester, Danvers, magazines; Miss Nellie C. Magoun, Marblehead, clothing; Mrs. F. H. Perry, Beverly, library books and victrola records; Mr. Bowser of Bowser & Co., Wakefield, rubber balls; Radiola for B-1, Mr. Joseph Donovan, Lawrence; Ear phones for same, Miss Dorothy Woods, Hathorne.

I desire to record my appreciation of the services rendered our soldier patients by the Women's Auxiliaries, the American Legion Posts in this district, the Knights of Columbus, the Veterans of the World War, U. S. Veterans' Bureau, and the Disabled Soldiers' Christmas Remembrance Committee. Throughout the year, special entertainments were provided for the soldiers, and gifts of tobacco, fruit, delicacies, writing materials and reading matter were generously distributed by these patriotic organizations.

ENTERTAINMENTS AND AMUSEMENTS

During the winter, dances for the patients were held weekly, and moving pictures exhibited Thursday and Friday evenings. Special entertainments were given at Christmas, New Year's and Fourth of July. Card parties and musical entertainments, vocal and instrumental, furnished additional diversion.

During the summer, baseball was the great attraction for all. Matches between hospital teams and visiting teams were held weekly. Field sports were held on the Fourth of July, in which healthy rivalry and great enthusiasm were evoked.

The Christmas season, as usual, was suitably observed at the hospital. All the wards had Christmas trees, and were elaborately decorated. On Christmas morning carols were sung in all the wards, by a group of singers composed of patients and employees. A generous response was made by friends of patients and the public to our holiday announcements. Every patient was presented with gifts contributed by friends or by the hospital. Friends of the hospital contributed money to provide gifts for those patients who had no near friends to remember them.

CONCLUSION

I am deeply indebted to a loyal, devoted corps of department heads, and to a willing, co-operative staff for services which made possible the success of the year's work. It is with a real sense of appreciation and gratitude that I recall the unselfish loyalty to the institution of these faithful officials.

To the Board of Trustees I desire to tender my heartfelt thanks for their counsel and support.

Respectfully submitted,

JOHN B. MACDONALD, *Superintendent.*

TREASURER'S REPORT

To the Commissioner of the Department of Mental Diseases.

I respectfully submit the following report of the finances of this institution for the fiscal year ending November 30, 1924.

CASH ACCOUNT

Receipts

<i>Income</i>		
Board of inmates:		
Private	\$56,002.35	
Reimbursements, insane	\$5,943.55	
		\$141,945.90
Personal services:		
Reimbursement from Board of Retirement		180.39
Sales:		
Food	\$676.23	
Clothing and materials	440.36	
Furnishings and household supplies	38.27	
Medical and general care	361.21	
Heat, light and power	25.25	
Farm:		
Cows and calves	\$393.30	
Hides	195.79	
Ice	43.25	
Wood	16.00	
Sundries	222.15	
		\$870.49
Garage, stable and grounds	70.51	
Repairs, ordinary	700.31	
Repairs and renewals	11.75	
		3,194.38
Miscellaneous:		
Interest on bank balances	\$242.68	
Rent	30.00	
		272.68
Total income		\$145,593.35

MAINTENANCE

Balance from previous year, brought forward	\$5,049.47
Appropriation, current year	591,748.36*
Total	\$596,797.83
Expenses (as analyzed below)	586,928.84
Balance reverting to treasury of Commonwealth	\$9,868.99
* Original appropriation	\$577,100.00
Transfer from appropriation for personal services, Chap. 510, Acts 1924	9,500.00
Transfer from appropriation for milch cows, Chap. 126, Acts of 1924	5,148.36
	\$591,748.36

Analysis of Expenses

Personal services	\$273,992.04
Religious instruction	1,842.90
Travel, transportation and office expenses	6,318.24
Food	96,002.40
Clothing and materials	20,214.51
Furnishings and household supplies	39,257.68
Medical and general care	25,373.96
Heat, light and power	61,901.52
Farm	32,290.36
Garage, stable and grounds	7,427.66
Repairs, ordinary	17,909.78
Repairs and renewals	4,397.79
Total expenses for maintenance	\$586,928.84

SPECIAL APPROPRIATIONS

Balance December 1, 1923	\$37,646.27
Appropriations for current year	19,300.00
Total	\$56,946.27
Expended during the year (see statement below)	\$24,024.67
	24,024.67
Balance November 30, 1924, carried to next year	\$32,921.60

OBJECT	Act or or Resolve	Whole Amount	Expended During Fiscal Year	Total Expended to Date	Balance at End of Year
Power Plant	629 of 1920	\$250,000.00	\$8,422.23	\$245,758.20	\$4,241.80
Electrical Refrigerating and Lighting Plant	203 of 1921	50,000.00	15,602.44	46,620.20	3,379.80
Storage House	126 of 1923	6,000.00	—	—	6,000.00
Equipment for Food Service	126 of 1924	7,300.00	—	—	7,300.00
Additional Fire Protection	510 of 1924	12,000.00	—	—	12,000.00
		\$325,300.00	\$24,024.67	\$292,378.40	\$32,921.60

Balance carried to next year	\$32,921.60
Total as above	\$32,921.60

PER CAPITA

During the year the average number of inmates has been 1,702.86
Total cost for maintenance, \$586,928.84
Equal to a weekly per capita cost of \$6.6283
Receipt from sales, \$3,194.38
Equal to a weekly per capita of \$0.036
All other institution receipts, \$142,398.97
Equal to a weekly per capita of \$1.6081
Net weekly per capita, \$4.9842

Respectfully submitted,

GLADYS E. LEACH,
Treasurer.

VALUATION

NOVEMBER 30, 1923

REAL ESTATE

Land (517 acres)	\$88,400.00
Buildings	2,529,359.85
	\$2,617,759.85

PERSONAL PROPERTY

Travel, transportation and office expenses	\$4,348.97
Food	23,997.32
Clothing and materials	13,991.47
Furnishings and household supplies	107,853.17
Medical and general care	12,181.47
Heat, light and power	31,196.84
Farm	48,428.82
Garage, stable and grounds	4,961.49
Repairs	19,334.44
	\$266,293.99

SUMMARY

Real estate	\$2,617,759.85
Personal property	266,293.99
	\$2,884,053.84

STATISTICAL TABLES

AS ADOPTED BY AMERICAN PSYCHIATRIC ASSOCIATION

PRESCRIBED BY MASSACHUSETTS DEPARTMENT OF MENTAL DISEASES

TABLE 1. — *General Information.*

Date of opening as an institution for the insane: May 13, 1878

Type of institution: State

Hospital plant:

Value of hospital property:

Real estate including buildings	\$2,617,759.85
Personal property	266,293.99

Total	\$2,884,053.84
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Total acreage of hospital property owned, 517

Additional acreage rented, 150

Total acreage under cultivation during previous year, 347

	ACTUALLY IN SERVICE AT END OF YEAR			VACANCIES AT END OF YEAR		
	M.	F.	T.	M.	F.	T.
Officers and employees:						
Superintendents	1	—	1	—	—	—
Assistant physicians	7	1	8	—	—	3
Medical internes	—	—	—	—	—	—
Clinical assistants	—	—	—	—	—	—
Total physicians	8	1	9	—	—	3
Stewards	1	—	1	—	—	—
Resident dentists	1	—	1	—	—	—
Graduate nurses	—	6	6	—	—	—
Other nurses and attendants	72	7	169	13	22	35
Teachers of occupational therapy	2	3	5	—	1	1
Social workers	—	2	2	—	—	—
All other officers and employees	72	48	120	6	6	12
Total officers and employees	148	156	304	19	29	48
	ACTUALLY IN INSTITUTION			ABSENT FROM INSTI- TUTION BUT STILL ON BOOKS		
	M.	F.	T.	M.	F.	T.
Census of patient population at end of year:						
White:						
Insane	736	961	1697	202	175	377
All other cases	2	3	5	—	—	—
Total	738	964	1702	202	175	377
Colored:						
Insane	10	9	19	—	—	—
Total	10	9	19	—	—	—
Grand total	748	973	1721	202	175	377
				M.	F.	T.
Patients employed in industrial classes or in general hospital work on date of report				159	334	493
Average daily number of all patients actually in institution during year				730.46	972.40	1,702.86
Voluntary patients admitted during year				—	1	1
Persons given advice or treatment in out-patient clinics during year				107	61	168

TABLE 2. — *Financial Statement.*

See treasurer's report for data requested under this table.

TABLE 3. — *Movement of Insane Patient Population for Year ending September 30, 1924.*

	M.	F.	T.
1. Insane patients on books of institution at beginning of institution year	913	1124	2037
2. Admissions during year:			
(a) First admissions	254	239	493
(b) Readmissions	68	61	129
(c) Transfers from other institutions for mental diseases	13	11	24
3. Total received during year	335	311	646
4. Total on books during year	1248	1435	2683
5. Discharged from books during year:			
(a) As recovered	25	8	33
(b) As improved	119	108	227
(c) As unimproved	34	27	61
(d) As without psychosis	6	6	12
(e) Transferred to other institutions for mental diseases	31	44	75
(f) Died during year	106	111	217
6. Total discharged, transferred and died during year	321	304	625
7. Insane patients remaining on books of institution at end of institution year	927	1131	2058

TABLE 4. — *Nativity of First Admissions and of Parents of First Admissions for the Year ending September 30, 1924.*

NATIVITY	PATIENTS			PARENTS OF MALE PATIENTS			PARENTS OF FEMALE PATIENTS		
	M.	F.	T.	F. ¹	M. ²	Both	F. ¹	M. ²	Both
United States	139	139	278	67	69	136	69	66	135
*Asia	1	-	1	-	-	-	-	-	-
Austria	1	1	2	3	3	6	1	1	2
†Canada	27	32	59	35	39	74	41	44	85
England	4	10	14	9	5	14	16	13	29
Finland	-	2	2	1	1	2	2	2	4
France	1	-	1	3	1	4	1	1	2
Germany	4	3	7	6	6	12	4	3	7
Greece	7	3	10	7	7	14	3	3	6
Hungary	1	-	1	1	-	1	-	-	-
India	-	1	1	-	-	-	-	-	-
Ireland	17	21	38	49	47	96	48	47	95
Italy	14	13	27	19	19	38	15	15	30
Norway	-	1	1	-	-	-	1	1	2
Poland	11	1	12	11	11	22	1	1	2
Portugal	2	1	3	2	1	3	2	2	4
Russia	18	9	27	17	17	34	12	12	24
Scotland	3	1	4	4	5	9	6	4	10
South America	-	-	-	-	1	1	-	-	-
Sweden	2	-	2	3	2	5	1	1	2
Switzerland	-	-	-	-	-	-	-	1	1
Turkey in Asia	-	-	-	1	1	2	-	-	-
Turkey in Europe	1	-	1	-	-	-	-	-	-
Wales	1	-	1	1	1	2	-	-	-
Other countries	-	1	1	-	-	-	-	-	-
Unascertained	-	-	-	15	18	33	16	22	38
Total	254	239	493	254	254	508	239	239	478

¹Fathers.²Mothers.

*Not otherwise specified.

†Includes Newfoundland.

TABLE 5. — *Citizenship of First Admissions for the Year ending September 30, 1924.*

	M.	F.	T.
Citizens by birth	139	139	278
Citizens by naturalization	46	35	81
Aliens	57	40	97
Citizenship unascertained	12	25	37
Total	254	239	493

TABLE 6. — *Psychoses of First Admissions for the Year ending September 30, 1924.*

PSYCHOSES			M.	F.	T.	M.	F.	T.
1.	Traumatic psychoses					2	—	2
2.	Senile psychoses					12	20	32
3.	Psychoses with cerebral arteriosclerosis					30	50	80
4.	General paralysis					37	16	53
5.	Psychoses with cerebral syphilis					1	2	3
6.	Psychoses with Huntington's chorea					1	—	1
7.	Psychoses with brain tumor					—	—	—
8.	Psychoses with other brain or nervous diseases, total					10	3	13
	Other diseases		10	3	13			
9.	Alcoholic psychoses, total					45	1	46
	Delirium tremens		15	—	15			
	Acute hallucinosis		14	1	15			
	Other types, acute or chronic		16	—	16			
10.	Psychoses due to drugs and other exogenous toxins, total					1	—	1
	Opium (and derivatives), cocaine, bromides, chloral, etc., alone or combined		1	—	1			
11.	Psychoses with pellagra					—	—	—
12.	Psychoses with other somatic diseases, total					6	17	23
	Delirium with infectious diseases		—	3	3			
	Exhaustion delirium		—	3	3			
	Delirium of unknown origin		2	1	3			
	Cardio-renal diseases		2	4	6			
	Other diseases or conditions		2	6	8			
13.	Manic-depressive psychoses, total					19	34	53
	Manic type		11	10	21			
	Depressive type		7	9	16			
	Other types		1	15	16			
14.	Involution melancholia					—	12	12
15.	Dementia praecox (schizophrenia)					40	44	84
16.	Paranoia and paranoid conditions					3	—	3
17.	Epileptic psychoses					5	6	11
18.	Psychoneuroses and neuroses, total					3	1	4
	Psychasthenic type (anxiety and obsessive forms)		2	—	2			
	Neurasthenic type		—	1	1			
	Other types		1	—	1			
19.	Psychoses with psychopathic personality					3	—	3
20.	Psychoses with mental deficiency					12	12	24
21.	Undiagnosed psychoses					15	17	32
22.	Without psychosis, total					9	4	13
	Epilepsy without psychosis		—	1	1			
	Alcoholism without psychosis		2	—	2			
	Psychopathic personality without psychosis		1	—	1			
	Mental deficiency without psychosis		4	2	6			
	Others		2	1	3			
Total						254	239	493

TABLE 7. — *Race of First Admissions classified with Reference to Principal Psychoses for the Year ending September 30, 1924.*

RACE	TOTAL			TRAUMATIC			SENILE			WITH CEREBRAL ARTERIO-SCLEROSIS			GENERAL PARALYSIS			WITH CEREBRAL SYPHILIS		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
African (black)	6	2	8	-	-	-	-	-	-	-	-	-	1	-	1	-	-	-
American Indian	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Armenian	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
English	25	45	70	-	-	-	3	6	9	5	11	16	5	3	8	-	-	-
Finnish	1	2	3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
French	17	17	34	-	-	-	-	2	2	2	2	4	4	2	6	-	-	-
German	5	3	8	-	-	-	1	-	1	3	1	4	-	-	-	-	-	-
Greek	7	3	10	-	-	-	-	-	-	-	-	-	1	-	1	-	-	-
Hebrew	5	12	17	-	-	-	-	-	-	-	1	1	-	1	1	-	-	-
Irish	55	58	113	1	-	1	4	6	10	6	11	17	4	5	9	1	-	1
Italian	23	15	38	-	-	-	-	-	-	1	3	4	5	-	5	-	-	-
Lithuanian	5	2	7	-	-	-	-	-	-	-	-	-	1	-	1	-	-	-
Magyar	1	-	1	-	-	-	-	-	-	1	-	1	-	-	-	-	-	-
Portuguese	2	3	5	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Roumanian	1	-	1	-	-	-	-	-	-	1	-	1	-	-	-	-	-	-
†Scandinavian	1	3	4	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Scotch	7	9	16	-	-	-	-	3	3	2	3	5	1	-	1	-	-	-
‡Slavonic	20	1	21	-	-	-	-	-	-	-	-	-	1	-	1	-	-	-
Welsh	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Mixed	37	36	73	-	-	-	2	2	4	3	10	13	8	3	11	-	1	1
Race unascertained	33	28	61	1	-	1	2	1	3	6	8	14	6	2	8	-	1	1
Total	254	239	493	2	-	2	12	20	32	30	50	80	37	16	53	1	2	3

*Includes "North" and "South."

†Norwegians, Danes and Swedes.

‡Includes Bohemian, Bosnian, Croatian, Delmatian, Herzegovinian, Montenegrin, Moravian, Polish, Russian, Ruthenian, Servian, Slovak, Slovenian.

TABLE 7. — *Race of First Admissions classified with Reference to Principal Psychoses for the Year ending September 30, 1924 — Continued.*

RACE	WITH HUNT- INGTON'S CHOREA			WITH BRAIN TUMOR			WITH OTHER BRAIN OR NERVOUS DISEASES			ALCOHOLIC			DUE TO DRUGS AND OTHER EXOGENOUS TOXINS			WITH PELLAGRA		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
African (black)	-	-	-	-	-	-	-	-	-	-	1	1	-	-	-	-	-	-
American Indian	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Armenian	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
English	-	-	-	-	-	-	-	-	-	2	-	2	-	-	-	-	-	-
Finnish	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
French	-	-	-	-	-	-	2	-	2	3	-	3	-	-	-	-	-	-
German	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	-	-
Greek	-	-	-	-	-	-	1	-	1	1	-	1	-	-	-	-	-	-
Hebrew	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Irish	-	-	-	-	-	-	4	1	5	14	-	14	-	-	-	-	-	-
Italian	-	-	-	-	-	-	-	-	-	2	-	2	-	-	-	-	-	-
Lithuanian	-	-	-	-	-	-	-	1	1	-	-	-	-	-	-	-	-	-
Magyar	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Portuguese	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Roumanian	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
†Scandinavian	-	-	-	-	-	-	-	-	-	1	-	1	-	-	-	-	-	-
Scotch	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
‡Slavonic	-	-	-	-	-	-	1	-	1	15	-	15	-	-	-	-	-	-
Welsh	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Mixed	1	-	1	-	-	-	-	1	1	4	-	4	-	-	-	-	-	-
Race unascertained	-	-	-	-	-	-	2	-	2	3	-	3	-	-	-	-	-	-
Total	1	-	1	-	-	-	10	3	13	45	1	46	1	-	1	-	-	-

*Includes "North" and "South."

†Norwegians, Danes and Swedes.

‡Includes Bohemian, Bosnian, Croatian, Delmatian, Herzegovinian, Montenegrin, Moravian, Polish, Russian, Ruthenian, Servian, Slovak, Slovenian.

TABLE 7. — *Race of First Admissions classified with Reference to Principal Psychoses for the Year ending September 30, 1924 — Continued.*

RACE	WITH OTHER SOMATIC DISEASES			MANIC- DEPRESSIVE			INVOLUTION MELAN- CHOLIA			DEMESTIA PRAXIS			PARANOID AND PARANOID CONDITIONS			EPILEPTIC PSYCHOSES		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
African (black)	-	-	-	1	-	1	-	-	-	4	-	4	-	-	-	-	-	-
American Indian	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Armenian	-	-	-	-	-	-	-	-	-	1	-	1	-	-	-	-	-	-
English	1	1	2	3	5	8	-	3	3	3	9	12	1	-	1	-	1	1
Finnish	-	-	-	-	1	1	-	-	-	-	1	1	-	-	-	-	-	-
French	-	1	1	1	3	4	-	-	-	2	5	7	-	-	-	1	-	1
German	-	1	1	-	-	-	-	1	1	-	-	-	-	-	-	-	-	-
Greek	-	-	-	1	1	2	-	-	-	1	2	3	-	-	-	-	-	-
Hebrew	-	1	1	1	3	4	-	1	1	2	3	5	-	-	-	-	-	1
Irish	1	7	8	2	7	9	-	3	3	6	8	14	-	-	-	1	1	1
*Italian	-	1	1	-	1	1	-	1	1	3	5	13	-	-	-	1	-	1
Lithuanian	1	-	1	1	-	1	-	-	-	3	1	4	-	-	-	-	-	-
Magyar	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Portuguese	-	-	-	1	2	3	-	-	-	1	-	1	-	-	-	-	1	1
Romanian	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
†Scandinavian	-	-	-	-	2	2	-	1	1	-	-	-	-	-	-	-	-	-
Scotch	-	-	-	2	2	4	-	-	-	1	1	-	-	-	-	2	-	2
‡Slavonic	-	-	-	-	-	-	-	-	-	2	-	2	-	-	-	-	-	-
Welsh	-	-	-	-	-	-	-	-	-	1	-	1	-	-	-	-	-	-
Mixed	2	4	6	3	5	8	-	1	1	3	5	8	2	-	2	1	1	2
Race unascertained	1	1	2	4	2	6	-	1	1	3	4	7	-	-	-	-	2	2
Total	6	17	23	20	34	54	-	12	12	40	44	84	3	-	3	5	6	11

*Includes "North" and "South."

†Norwegians, Danes and Swedes.

‡Includes Bohemian, Bosnian, Croatian, Dalmatian, Herzegovinian, Montenegrin, Moravian, Polish, Russian, Ruthenian, Serbian, Slovak, Slovenian.

TABLE 7. — *Race of First Admissions classified with Reference to Principal Psychoses for the Year ending September 30, 1924 — Concluded.*

	PSYCHO- NEUROSES AND NEUROSES			WITH PSYCHOPATHIC PERSONALITY			WITH MENTAL DEFICIENCY			UNDIAGNOSED PSYCHOSES			WITHOUT PSYCHOSES		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
African (black)	-	-	-	-	-	-	-	-	-	-	1	1	-	-	-
American Indian	-	-	-	1	-	1	-	-	-	-	-	-	-	-	-
Armenian	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
English	-	-	-	1	-	1	-	3	3	1	2	3	-	1	1
Finnish	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1
French	-	-	-	-	-	-	-	1	1	1	-	1	1	1	2
German	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Greek	-	-	-	-	-	-	1	-	1	1	-	1	-	-	-
Hebrew	-	1	1	-	-	-	1	1	2	1	-	1	-	-	-
Irish	2	-	2	-	-	-	2	2	4	5	7	15	-	-	-
*Italian	-	-	-	-	-	-	1	3	4	2	1	3	3	-	3
Lithuanian	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Magyar	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Portuguese	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Romanian	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
†Scandinavian	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Scotch	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
‡Slavonic	-	-	-	-	-	-	-	-	-	1	1	2	-	-	-
Welsh	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Mixed	1	-	1	1	-	1	5	1	6	-	1	1	1	1	2
Race unascertained	-	-	-	-	-	-	2	1	3	-	4	4	3	1	4
Total	3	1	4	3	-	3	12	12	24	15	17	32	9	4	13

*Includes "North" and "South."

†Norwegians, Danes and Swedes.

‡Includes Bohemian, Bosnian, Croatian, Dalmatian, Herzegovinian, Montenegrin, Moravian, Polish, Russian, Ruthenian, Serbian, Slovak, Slovenian.

TABLE 8.— *Age of First Admissions classified with Reference to Principal Psychoses for the Year ending September 30, 1924.*

PSYCHOSES	TOTAL			UNDER 15 YEARS			15—19 YEARS			20—24 YEARS			25—29 YEARS		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Traumatic	2	—	2	—	—	—	—	—	—	—	—	—	1	—	1
2. Senile	12	20	32	—	—	—	—	—	—	—	—	—	—	—	—
3. With cerebral arteriosclerosis	30	50	80	—	—	—	—	—	—	—	—	—	—	—	—
4. General paralysis	37	16	53	—	—	—	—	—	—	—	—	—	1	1	2
5. With cerebral syphilis	1	2	3	—	—	—	—	—	—	—	—	—	—	—	—
6. With Huntington's chorea	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—
7. With brain tumor	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
8. With other brain or nervous diseases	10	3	13	—	—	—	1	—	1	—	—	—	—	—	—
9. Alcoholic	45	1	46	—	—	—	—	—	—	1	—	1	3	—	3
10. Due to drugs and other exogenous toxins	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—
11. With pellagra	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
12. With other somatic diseases	6	17	23	—	—	—	1	1	2	1	1	—	—	2	2
13. Manic-depressive	19	34	53	—	—	—	1	1	2	1	1	2	3	9	12
14. Involution melancholia	—	12	12	—	—	—	—	—	—	—	—	—	—	—	—
15. Dementia præcox	40	44	84	—	—	—	2	3	5	12	3	15	14	8	22
16. Paranoia or paranoid conditions	3	—	3	—	—	—	—	—	—	—	—	—	—	—	—
17. Epileptic psychoses	5	6	11	—	—	—	1	—	1	—	—	—	—	1	1
18. Psychoneuroses and neuroses	3	1	4	—	—	—	—	—	—	—	—	—	—	—	—
19. With psychopathic personality	3	—	3	—	—	—	—	—	—	—	—	—	—	—	—
20. With mental deficiency	12	12	24	—	—	—	2	1	3	2	1	3	1	1	2
21. Undiagnosed psychoses	15	17	32	—	—	—	—	1	1	2	—	2	2	—	2
22. Without psychosis	9	4	13	—	1	1	2	1	3	2	—	2	2	—	2
Total	254	239	493	—	1	1	9	8	17	20	6	26	27	22	49

TABLE 8.— *Age of First Admissions classified with Reference to Principal Psychoses for the Year ending September 30, 1924 — Continued.*

PSYCHOSES	30—34 YEARS			35—39 YEARS			40—44 YEARS			45—49 YEARS			50—54 YEARS		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Traumatic	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—
2. Senile	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
3. With cerebral arteriosclerosis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
4. General paralysis	4	2	6	7	1	8	6	2	8	7	4	11	5	5	10
5. With cerebral syphilis	—	2	2	—	—	—	—	—	—	—	—	—	—	—	—
6. With Huntington's chorea	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
7. With brain tumor	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
8. With other brain or nervous diseases	—	—	—	1	2	3	—	—	—	2	—	2	3	1	4
9. Alcoholic	6	—	6	2	—	2	7	—	7	9	—	9	8	—	8
10. Due to drugs and other exogenous toxins	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1
11. With pellagra	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
12. With other somatic diseases	—	1	1	3	2	5	1	—	1	—	3	3	—	3	3
13. Manic-depressive	2	11	13	3	5	8	2	2	4	2	4	6	2	1	3
14. Involution melancholia	—	—	—	—	—	—	—	5	5	—	3	3	—	3	3
15. Dementia præcox	4	3	7	5	9	14	2	4	6	—	7	7	1	2	3
16. Paranoia or paranoid conditions	—	—	—	—	—	—	1	—	1	2	—	2	—	—	—
17. Epileptic psychoses	—	—	—	1	1	2	—	1	1	—	1	1	2	—	2
18. Psychoneuroses and neuroses	1	—	1	—	—	—	2	1	3	—	—	—	—	—	—
19. With psychopathic personality	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—
20. With mental deficiency	2	—	2	3	3	6	1	2	3	1	2	3	—	1	1
21. Undiagnosed psychoses	1	—	1	1	3	4	2	2	4	2	6	8	—	2	2
22. Without psychosis	—	—	—	1	1	2	—	—	—	—	—	—	1	—	1
Total	21	19	40	28	27	55	24	19	43	25	30	55	23	20	43

TABLE 8. — *Age of First Admissions classified with Reference to Principal Psychoses for the Year ending September 30, 1924* — Concluded.

PSYCHOSES	55—59 YEARS			60—64 YEARS			65—69 YEARS			70 YEARS AND OVER			UNASCE- RTAINED		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Traumatic	-	-	-	-	-	-	1	-	1	-	-	-	-	-	-
2. Senile	-	1	1	2	1	3	2	2	4	8	16	24	-	-	-
3. With cerebral arteriosclerosis.....	-	6	6	4	11	15	7	6	13	19	25	44	-	-	-
4. General paralysis	3	1	4	2	-	2	2	-	2	-	-	-	-	-	-
5. With cerebral syphilis	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-
6. With Huntington's chorea	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-
7. With brain tumor	-	-	-	2	-	2	1	-	1	-	-	-	-	-	-
8. With other brain or nervous diseases	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
9. Alcoholic	6	1	7	3	-	3	-	-	-	-	-	-	-	-	-
10. Due to drugs and other exogenous toxins	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
11. With pellagra	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
12. With other somatic diseases.....	1	3	4	-	1	1	1	-	1	-	-	-	-	-	-
13. Manic-depressive	2	-	2	1	-	1	-	-	-	-	-	-	-	-	-
14. Involution melancholia	-	-	-	-	1	1	-	-	-	-	-	-	-	-	-
15. Dementia præcox	-	3	3	-	-	-	-	1	1	-	1	1	-	-	-
16. Paranoia or paranoid conditions.....	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
17. Epileptic psychoses	1	-	1	-	1	1	-	1	1	-	-	-	-	-	-
18. Psychoneuroses and neuroses	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
19. With psychopathic personality	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-
20. With mental deficiency	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-
21. Undiagnosed psychoses	1	2	3	1	1	2	1	-	1	2	-	2	-	-	-
22. Without psychosis	-	-	-	1	-	1	-	1	1	-	-	-	-	-	-
Total	17	18	35	16	16	32	15	11	26	29	42	71	-	-	-

TABLE 9. — Degree of Education of First Admissions classified with Reference to Principal Psychoses for the Year ending September 30, 1924.

PSYCHOSES	TOTAL			ILLITERATE			READS AND WRITES*			COMMON SCHOOL			HIGH SCHOOL			COLLEGE			UNASCERTAINED			
	M	F	T.	M.	F	T.	M.	F	T.	M.	F	T.	M.	F	T.	M.	F	T.	M.	F	T.	
1. Traumatic	2	—	2	—	—	—	1	—	1	—	—	—	1	—	—	—	—	—	—	—	—	—
2. Senile	12	20	32	1	1	2	—	4	4	—	8	19	—	—	—	—	—	—	—	—	—	—
3. With cerebral arteriosclerosis	30	50	80	3	6	9	4	5	9	11	20	41	2	1	1	—	—	—	—	—	—	—
4. General paralysis	37	16	53	4	1	5	5	1	6	19	8	27	6	3	9	2	1	3	1	2	5	5
5. With cerebral syphilis	1	2	3	—	—	—	—	—	—	1	2	3	—	—	—	—	—	—	—	—	—	—
6. With Huntington's chorea	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
7. With brain tumor	—	3	13	—	—	—	3	—	—	5	—	—	2	1	3	—	—	—	—	—	—	—
8. With other brain or nervous diseases	10	3	13	—	2	2	3	—	—	—	—	—	2	2	2	—	—	—	—	—	—	—
9. Alcoholic	45	1	46	14	1	15	7	—	—	20	—	—	2	—	2	—	—	—	—	2	—	2
10. Due to drugs and other exogenous toxins	1	—	1	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—
11. With pellagra	—	6	17	—	—	—	—	1	1	—	4	13	1	—	—	—	—	—	—	—	—	—
12. With other somatic diseases	19	34	53	—	3	3	2	1	3	10	18	28	6	10	16	1	2	3	—	—	3	3
13. Manic-depressive	—	12	12	—	—	—	—	—	—	—	9	9	—	3	3	—	—	—	—	—	—	—
14. Involution melancholia	40	44	84	2	2	4	8	3	11	20	26	46	9	11	20	1	2	3	—	—	—	—
15. Dementia praecox	3	—	3	—	—	—	—	—	—	3	3	6	—	—	—	—	—	—	—	—	—	—
16. Paranoia or paranoid conditions	5	6	11	1	—	1	—	—	—	—	3	6	9	—	—	—	—	—	—	—	—	—
17. Epileptic psychoses	3	1	4	—	1	1	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—
18. Psychoneuroses and neuroses	3	—	3	—	—	—	—	—	—	2	—	—	—	—	—	—	—	—	—	—	—	—
19. With psychopathic personality	12	12	24	3	1	4	2	5	7	6	13	—	—	—	—	—	—	—	—	—	—	—
20. With mental deficiency	15	17	32	2	1	3	2	4	6	7	6	14	2	2	4	1	2	3	2	—	—	2
21. Undiagnosed psychoses	9	4	13	—	—	—	—	2	2	8	2	10	1	—	—	—	—	—	—	—	—	—
22. Without psychosis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Total	254	239	493	30	19	49	35	26	61	143	126	269	33	49	82	8	8	16	5	11	—	16

*Includes those who did not complete fourth grade in school.

TABLE 10. — *Environment of First Admissions classified with Reference to Principal Psychoses for the Year ending September 30, 1924.*

PSYCHOSES	TOTAL			URBAN			RURAL		
	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Traumatic	2	—	2	1	—	1	1	—	1
2. Senile	12	20	32	11	18	29	1	2	3
3. With cerebral arteriosclerosis	30	50	80	28	47	75	2	3	5
4. General paralysis	37	16	53	36	16	52	1	—	1
5. With cerebral syphilis	1	2	3	1	2	3	—	—	—
6. With Huntington's chorea	1	—	1	1	—	1	—	—	—
7. With brain tumor	—	—	—	—	—	—	—	—	—
8. With other brain or nervous diseases	10	3	13	10	3	13	—	—	—
9. Alcoholic	45	1	46	45	1	46	—	—	—
10. Due to drugs and other exogenous toxins	1	—	1	1	—	1	—	—	—
11. With pellagra	—	—	—	—	—	—	—	—	—
12. With other somatic diseases	6	17	23	6	17	23	—	—	—
13. Manic-depressive	19	34	53	19	33	52	—	1	1
14. Involution melancholia	—	12	12	—	11	11	—	1	1
15. Dementia præcox	40	44	84	40	42	82	—	2	2
16. Paranoia or paranoid conditions	3	—	3	1	—	1	2	—	2
17. Epileptic psychoses	5	6	11	4	6	10	1	—	1
18. Psychoneuroses and neuroses	3	1	4	3	1	4	—	—	—
19. With psychopathic personality	3	—	3	3	—	3	—	—	—
20. With mental deficiency	12	12	24	11	12	23	1	—	1
21. Undiagnosed psychoses	15	17	32	15	17	32	—	—	—
22. Without psychosis	9	4	13	9	4	13	—	—	—
Total	254	239	493	245	230	475	9	9	18

TABLE 11. — *Economic Condition of First Admissions classified with Reference to Principal Psychoses for the Year ending September 30, 1924.*

PSYCHOSES	TOTAL			DEPENDENT			MARGINAL			COMFORT- ABLE			UNASCERTAINED		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Traumatic	2	—	2	1	—	1	1	—	1	—	—	—	—	—	—
2. Senile	12	20	32	3	4	7	7	8	15	2	6	8	—	2	2
3. With cerebral arteriosclerosis	30	50	80	5	14	19	21	16	37	2	14	16	2	6	8
4. General paralysis	37	16	53	7	4	11	26	8	34	3	4	7	1	—	1
5. With cerebral syphilis	1	2	3	—	—	—	1	2	3	—	—	—	—	—	—
6. With Huntington's chorea	1	—	1	—	—	—	1	—	1	—	—	—	—	—	—
7. With brain tumor	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
8. With other brain or nervous diseases	10	3	13	2	—	2	8	2	10	—	1	1	—	—	—
9. Alcoholic	45	1	46	1	—	1	41	1	42	3	—	3	—	—	—
10. Due to drugs and other exogenous toxins	1	—	1	—	—	—	1	—	1	—	—	—	—	—	—
11. With pellagra	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
12. With other somatic diseases	6	17	23	—	1	1	6	10	16	—	5	5	—	1	1
13. Manic-depressive	19	34	53	1	3	4	16	20	36	1	10	11	1	2	2
14. Involution melancholia	—	12	12	—	1	1	—	7	7	—	2	2	—	—	—
15. Dementia præcox	40	44	84	2	7	9	37	21	58	1	12	13	—	4	4
16. Paranoia or paranoid conditions	3	—	3	—	—	—	3	—	3	—	—	—	—	—	—
17. Epileptic psychoses	5	6	11	1	2	3	4	4	8	—	—	—	—	—	—
18. Psychoneuroses and neuroses	3	1	4	—	—	—	3	1	4	—	—	—	—	—	—
19. With psychopathic personality	3	—	3	—	—	—	3	—	3	—	—	—	—	—	—
20. With mental deficiency	12	12	24	3	6	9	9	5	14	—	1	1	—	—	—
21. Undiagnosed psychoses	15	17	32	1	4	5	10	8	18	2	5	7	2	—	2
22. Without psychosis	9	4	13	2	3	5	7	—	7	—	1	1	—	—	—
Total	254	239	493	29	49	78	205	113	318	14	61	75	6	16	22

TABLE 12. — *Use of Alcohol by First Admissions classified with Reference to Principal Psychoses for the Year ending September 30, 1924.*

PSYCHOSES	TOTAL			ABSTINENT			TEMPERATE			INTER- PERATE			UNASCER- TAINED		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Traumatic	2	-	2	-	-	-	1	-	1	1	-	1	-	-	-
2. Senile	12	20	32	4	13	17	6	-	6	1	-	1	1	7	8
3. With cerebral arteriosclerosis	30	50	80	14	31	45	9	11	20	5	2	7	2	6	8
4. General paralysis	37	16	53	7	7	14	18	3	21	9	2	11	3	4	7
5. With cerebral syphilis	1	2	3	-	-	-	1	-	1	-	1	1	-	1	1
6. With Huntington's chorea	1	-	1	-	-	-	-	-	-	1	-	1	-	-	-
7. With brain tumor	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
8. With other brain or nervous diseases	10	3	13	3	1	4	1	-	1	5	-	5	1	2	3
9. Alcoholic	45	1	46	-	-	-	3	-	3	42	1	43	-	-	-
10. Due to drugs and other exogenous toxins	1	-	1	-	-	-	1	-	1	-	-	-	-	-	-
11. With pellagra	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
12. With other somatic diseases	6	17	23	4	8	12	1	4	5	1	-	1	-	5	5
13. Manic-depressive	19	34	53	2	26	28	15	4	19	2	-	2	-	4	4
14. Involution melancholia	-	12	12	-	9	9	-	3	3	-	-	-	-	-	-
15. Dementia præcox	40	44	84	17	29	46	14	8	22	8	-	8	1	7	8
16. Paranoia or paranoid conditions	3	-	3	2	-	2	1	-	1	-	-	-	-	-	-
17. Epileptic psychoses	5	6	11	2	5	7	2	1	3	1	-	1	-	-	-
18. Psychoneuroses and neuroses	3	1	4	2	1	3	1	-	1	-	-	-	-	-	-
19. With psychopathic personality	3	-	3	3	-	3	-	-	-	-	-	-	-	-	-
20. With mental deficiency	12	12	24	4	9	13	3	1	4	3	-	3	2	2	4
21. Undiagnosed psychoses	15	17	32	4	8	12	5	3	8	3	1	4	3	5	8
22. Without psychosis	9	4	13	5	3	8	2	-	2	2	-	2	-	1	1
Total	254	239	493	73	150	223	84	38	122	84	7	91	13	44	57

TABLE 13. — *Marital Condition of First Admissions classified with Reference to Principal Psychoses for the Year ending September 30, 1924.*

PSYCHOSES	TOTAL			SINGLE			MARRIED			WIDOWED			SEPARATED			DIVORCED		
	M	F	T.	M.	F	T.	M	F.	T	M.	F.	T.	M	F.	T.	M.	F.	T.
1. Traumatic	2	2	2	—	—	—	2	—	2	—	—	—	—	—	—	—	—	—
2. Senile	12	20	32	4	3	7	—	5	7	6	12	18	—	—	—	—	—	—
3. With cerebral arteriosclerosis	30	50	80	5	13	18	14	10	24	11	23	34	—	2	2	—	2	2
4. General paralysis	37	16	53	10	1	11	21	12	33	2	3	5	—	—	—	4	—	4
5. With cerebral syphilis	1	2	3	—	—	—	1	2	3	—	—	—	—	—	—	—	—	—
6. With Huntington's chorea	1	—	1	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—
7. With brain tumor	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
8. With other brain or nervous diseases	10	3	13	6	—	6	4	3	7	—	—	—	—	—	—	—	—	—
9. Alcoholic	45	1	46	18	—	18	21	—	21	5	1	6	1	—	1	—	—	—
10. Due to drugs and other exogenous toxins	1	—	—	—	—	—	1	—	1	—	—	—	—	—	—	—	—	—
11. With pellagra	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
12. With other somatic diseases	6	17	23	2	3	5	1	11	12	2	1	3	—	—	—	1	2	3
13. Manic-depressive	19	34	53	9	10	19	7	22	29	1	1	2	—	—	—	2	1	3
14. Involution melancholia	—	12	12	—	5	5	—	6	6	—	—	—	—	—	—	—	—	—
15. Dementia præcox	40	44	84	32	20	52	7	18	25	—	4	4	1	2	3	—	—	—
16. Paranoia or paranoid conditions	3	—	3	—	—	—	3	—	3	—	—	—	—	—	—	—	—	—
17. Epileptic psychoses	3	6	9	3	3	6	2	2	4	—	1	1	—	—	—	—	—	—
18. Psychoneuroses and neuroses	3	3	6	3	—	3	—	2	5	—	—	—	—	—	—	—	—	—
19. With psychopathic personality	3	1	4	2	—	2	1	1	2	—	—	—	—	—	—	—	—	—
20. With mental deficiency	12	12	24	8	5	13	4	4	8	—	2	2	—	—	—	1	1	2
21. Undiagnosed psychoses	15	17	32	5	6	11	9	6	15	—	—	—	—	2	1	—	—	—
22. Without psychosis	9	4	13	6	3	9	2	—	2	—	1	1	—	—	—	—	—	—
Total	254	239	493	114	72	186	102	105	207	27	50	77	3	6	9	8	6	14

TABLE 14. — *Psychoses of Readmissions for the Year ending September 30, 1924.*

PSYCHOSES	M.	F.	T.
1. Traumatic psychoses	-	-	-
2. Senile psychoses	-	-	-
3. Psychoses with cerebral arteriosclerosis	3	1	4
4. General paralysis	2	1	3
5. Psychoses with cerebral syphilis	-	-	-
6. Psychoses with Huntington's chorea	-	-	-
7. Psychoses with brain tumor	-	-	-
8. Psychoses with other brain or nervous diseases	-	1	1
9. Alcoholic psychoses	15	1	16
10. Psychoses due to drugs and other exogenous toxins	-	-	-
11. Psychoses with pellagra	-	-	-
12. Psychoses with other somatic diseases	-	-	-
13. Manic-depressive psychoses	24	18	42
14. Involution melancholia	-	-	-
15. Dementia præcox	15	30	45
16. Paranoia and paranoid conditions	-	-	-
17. Epileptic psychoses	1	-	1
18. Psychoneuroses and neuroses	-	-	-
19. Psychoses with psychopathic personality	2	-	2
20. Psychoses with mental deficiency	4	6	10
21. Undiagnosed psychoses	2	3	5
22. Without psychosis	-	-	-
Total	68	61	129

TABLE 15. — *Discharges of Patients classified with Reference to Principal Psychoses and Condition on Discharge for the Year ending September 30, 1924.*

PSYCHOSES	TOTAL			RECOVERED			IMPROVED			UNIMPROVED			NOT INSANE		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Traumatic	1	1	2	-	-	-	1	1	2	-	-	-	-	-	-
2. Senile	-	1	1	-	-	-	-	-	-	-	1	1	-	-	-
3. With cerebral arteriosclerosis	12	8	20	1	-	1	7	8	15	4	-	4	-	-	-
4. General paralysis	4	3	7	-	1	1	2	2	4	2	-	2	-	-	-
5. With cerebral syphilis	3	-	3	-	-	-	2	-	2	1	-	1	-	-	-
6. With Huntington's chorea	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
7. With brain tumor	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
8. With other brain or nervous diseases	1	3	4	-	-	-	1	2	3	-	1	1	-	-	-
9. Alcoholic	51	4	55	17	2	19	32	1	33	2	1	3	-	-	-
10. Due to drugs and other exogenous toxins	3	3	6	-	-	-	3	3	6	-	-	-	-	-	-
11. With pellagra	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
12. With other somatic diseases	1	8	9	1	-	1	-	8	8	-	-	-	-	-	-
13. Manic-depressive	34	43	77	5	4	9	24	34	58	5	5	10	-	-	-
14. Involution melancholia	5	8	13	-	-	-	3	6	9	2	2	4	-	-	-
15. Dementia præcox	36	30	66	1	-	1	27	17	44	8	13	21	-	-	-
16. Paranoia or paranoid conditions	2	6	8	-	-	-	1	6	7	1	-	1	-	-	-
17. Epileptic psychoses	3	1	4	-	-	-	3	-	3	-	1	1	-	-	-
18. Psychoneuroses and neuroses	3	3	6	-	-	-	3	2	5	-	1	1	-	-	-
19. With psychopathic personality	6	1	7	-	-	-	5	1	6	1	-	1	-	-	-
20. With mental deficiency	6	8	14	-	-	-	3	8	11	3	-	3	-	-	-
21. Undiagnosed psychoses	5	10	15	-	1	1	2	7	9	3	2	5	-	-	-
22. Without psychosis	8	8	16	-	-	-	-	2	2	2	-	2	6	6	12
Total	184	149	333	25	8	33	119	108	227	34	27	61	6	6	12

TABLE 16. — *Causes of Death of Patients classified with Reference to Principal Psychoses for the Year ending September 30, 1924.*

CAUSES OF DEATH	TOTAL			SENILE			WITH CEREBRAL ARTERIO-SCLEROSIS			GENERAL PARALYSIS			ALCOHOLIC			MANIC-DEPRESSIVE			INVOLUTION MELAN-CHOLIA		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
<i>General Diseases</i>																					
Erysipelas.....	1	—	1	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Septicæmia.....	5	16	21	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Tuberculosis of lungs.....	1	5	6	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Cancer.....	1	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diabetes.....	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other general diseases.....	—	2	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
<i>Nervous System</i>																					
Apoplexy (cerebral hemorrhage).....	2	7	9	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
General paralysis of insane.....	34	10	44	—	—	—	—	—	—	33	8	41	—	—	—	—	—	—	—	—	—
Cerebro-spinal syphilis.....	1	1	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Exhaustion from other mental diseases.....	1	4	4	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Brain tumor.....	1	2	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other diseases of brain.....	1	3	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Epilepsy.....	1	2	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Chorea.....	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other diseases of nervous system.....	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
<i>Circulatory System</i>																					
Endocarditis and myocarditis.....	5	6	11	1	1	2	1	1	2	—	—	—	—	—	—	—	—	—	—	—	—
Angina pectoris.....	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other diseases of the heart.....	1	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Arteriosclerosis.....	28	28	56	3	7	10	20	16	36	—	1	1	—	—	—	1	2	3	—	—	—
<i>Respiratory System</i>																					
Bronchitis.....	1	—	1	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Bronchopneumonia.....	6	6	12	2	2	4	2	—	2	—	—	—	—	—	—	—	—	—	—	—	—
Lobar pneumonia.....	3	4	7	—	1	1	2	—	2	—	—	—	—	—	—	—	—	—	—	—	—
Other diseases of the respiratory system.....	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
<i>Digestive System</i>																					
Diarrhea and enteritis.....	—	3	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Hernia and intestinal obstruction.....	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other diseases of intestines.....	2	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
<i>Genito-Urinary System</i>																					
Chronic nephritis.....	3	4	7	1	—	1	1	1	2	—	—	—	—	—	—	—	—	—	—	—	—
Other diseases of kidneys and annexa.....	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diseases of bladder.....	1	—	1	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
<i>Violence</i>																					
Suicide.....	1	1	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Accidental traumatism.....	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other external violence.....	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Total.....	106	111	217	13	14	27	29	23	52	35	11	46	3	2	5	2	14	16	—	1	1

TABLE 16. — Causes of Death of Patients classified with Reference to Principal Psychoses for the Year ending September 30, 1924—Concluded.

CAUSES OF DEATH	DEMENTIA PRECOX		PARANOIA OR PARANOID CONDITIONS			EPILEPTIC PSYCHOSES			PSYCHO- NEUROSES AND NEUROSES			WITH PSYCHO- PATHIC PERSONALITY			WITH MENTAL DEFICIENCY			*ALL OTHER PSYCHOSES		
	M.	F.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
<i>General Diseases</i>																				
Erysipelas	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	2
Septicæmia	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1
Tuberculosis of lungs	4	10	14	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	2
Cancer	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	3
Diabetes	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Other general diseases	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1
<i>Nervous System</i>																				
Apoplexy (cerebral hemorrhage)	-	3	3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3	3
General paralysis of insane	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	2
Cerebro-spinal syphilis	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1
Exhaustion from other mental diseases	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1
Brain tumor	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	2
Other diseases of brain	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1
Epilepsy	-	-	-	-	-	-	1	2	-	-	-	-	-	-	-	-	-	-	1	1
Chorea	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1
Other diseases of nervous system	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1
<i>Circulatory System</i>																				
Endocarditis and myocarditis	-	2	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3	4
Angina pectoris	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Other diseases of the heart	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Arteriosclerosis	2	1	3	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	2	2
<i>Respiratory System</i>																				
Bronchitis	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Bronchopneumonia	1	2	3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1
Lobar pneumonia	1	1	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1
Other diseases of the respiratory system	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1
<i>Digestive System</i>																				
Diarrhea and enteritis	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Hernia and intestinal obstruction	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Other diseases of intestines	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1
<i>Genito-Urinary System</i>																				
Chronic nephritis	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	2
Other diseases of kidneys and annexa	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Diseases of bladder	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<i>Violence</i>																				
Suicide	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Accidental traumatism	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Other external violence	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Total	10	23	33	-	1	1	1	1	-	-	-	-	-	-	1	1	2	12	20	32

*Includes group 22, "without psychosis."

TABLE 17.—Age of Patients at Time of Death classified with Reference to Principal Psychoses for the Year ending September 30, 1924.

PSYCHOSES	TOTAL			UNDER 15 YEARS			15-19 YEARS			20-24 YEARS			25-29 YEARS			30-34 YEARS			35-39 YEARS		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Traumatic	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
2. Senile	13	14	27	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
3. With cerebral arteriosclerosis	29	23	52	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
4. General paralysis	35	11	46	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
5. With cerebral syphilis	2	2	4	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
6. With Huntington's chorea	1	1	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
7. With brain tumor	1	1	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
8. With other brain or nervous diseases	3	3	6	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
9. Alcoholic	3	2	5	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
10. Due to drugs and other exogenous toxins	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
11. With pellagra	-	4	7	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
12. With other somatic diseases	2	14	16	-	1	1	-	-	-	-	1	1	-	2	2	-	3	2	-	3	2
13. Manic-depressive	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
14. Involution melancholia	10	23	33	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
15. Dementia praecox	-	1	1	-	-	-	-	-	-	1	1	2	-	3	2	5	-	1	1	-	3
16. Paranoia or paranoid conditions	1	1	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
17. Epileptic psychoses	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
18. Psychoneuroses and neuroses	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
19. With psychopathic personality	1	1	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
20. With mental deficiency	1	1	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
21. Undiagnosed psychoses	1	8	9	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
22. Without psychosis	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Total	106	111	217	-	1	1	-	-	-	1	2	3	4	5	9	-	3	3	11	6	17

TABLE 17. — Age of Patients at Time of Death classified with Reference to Principal Psychoses for the Year ending September 30, 1924 — Concluded.

PSYCHOSES	40—44 YEARS			45—49 YEARS			50—54 YEARS			55—59 YEARS			60—64 YEARS			65—69 YEARS			70 YEARS AND OVER		
	M.		T.	M.		T.	M.		T.	M.		T.	M.		T.	M.		T.	M.		T.
	F.	T.		F.	T.		F.	T.		F.	T.		F.	T.		F.	T.		F.	T.	
1. Traumatic	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
2. Senile	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
3. With cerebral arteriosclerosis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
4. General paralysis	3	1	4	8	5	13	3	2	5	5	1	6	4	1	5	5	1	10	21	9	20
5. With cerebral syphilis	—	—	—	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
6. With Huntington's chorea	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
7. With brain tumor	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
8. With other brain or nervous diseases	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
9. Alcoholic	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
10. Due to drugs and other exogenous toxins	1	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
11. With pellagra	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
12. With other somatic diseases	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
13. Manic-depressive	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
14. Involution melancholia	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
15. Dementia precox	—	3	3	1	1	2	1	3	4	—	1	1	3	2	5	1	4	5	—	2	2
16. Parano a or paranoid conditions	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
17. Epileptic psychoses	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
18. Psychoneuroses and neuroses	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
19. With psychopathic personality	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
20. With mental deficiency	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
21. Undiagnosed psychoses	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
22. Without psychosis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Total	4	8	12	13	13	26	5	12	17	9	6	15	13	14	27	12	14	26	34	27	61

TABLE 18. — *Total Duration of Hospital Life of Patients dying in Hospital classified according to Principal Psychoses for the Year ending September 30, 1924.*

PSYCHOSES	TOTAL			LESS THAN 1 MONTH			1-3 MONTHS			4-7 MONTHS		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Traumatic	-	-	-	-	-	-	-	-	-	-	-	-
2. Senile	13	14	27	3	2	5	2	5	7	2	1	3
3. With cerebral arteriosclerosis	29	23	52	11	6	17	5	3	8	5	3	8
4. General paralysis	35	11	46	5	1	6	9	4	13	2	1	3
5. With cerebral syphilis	2	2	4	-	1	1	1	-	1	1	-	1
6. With Huntington's chorea	1	-	1	-	-	-	-	-	-	-	-	-
7. With brain tumor	1	-	1	-	-	-	-	-	-	-	-	-
8. With other brain or nervous diseases	3	3	6	-	-	-	2	1	3	1	1	2
9. Alcoholic	3	2	5	-	-	-	1	-	1	1	-	1
10. Due to drugs and other exogenous toxins	-	-	-	-	-	-	-	-	-	-	-	-
11. With pellagra	-	-	-	-	-	-	-	-	-	-	-	-
12. With other somatic diseases	4	7	11	2	4	6	2	2	4	-	-	-
13. Manic-depressive	2	14	16	-	2	2	-	-	-	-	1	1
14. Involution melancholia	-	1	1	-	1	1	-	-	-	-	-	-
15. Dementia præcox	10	23	33	-	-	-	1	2	3	-	-	-
16. Paranoia or paranoid conditions	-	1	1	-	-	-	-	-	-	-	-	-
17. Epileptic psychoses	1	1	2	-	-	-	-	-	-	-	-	-
18. Psychoneuroses and neuroses	-	-	-	-	-	-	-	-	-	-	-	-
19. With psychopathic personality	-	-	-	-	-	-	-	-	-	-	-	-
20. With mental deficiency	1	1	2	-	-	-	-	-	-	-	-	-
21. Undiagnosed psychoses	1	8	9	1	3	4	-	1	1	-	1	1
22. Without psychosis	-	-	-	-	-	-	-	-	-	-	-	-
Total	106	111	217	22	20	42	23	18	41	12	8	20

TABLE 18. — *Total Duration of Hospital Life of Patients dying in Hospital classified according to Principal Psychoses for the Year ending September 30, 1924 — Continued.*

PSYCHOSES	8-12 MONTHS			1-2 YEARS			3-4 YEARS			5-9 YEARS		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Traumatic	-	-	-	-	-	-	-	-	-	-	-	-
2. Senile	-	-	-	1	3	4	4	2	6	1	1	2
3. With cerebral arteriosclerosis	2	5	7	2	1	3	2	1	3	2	4	6
4. General paralysis	8	3	11	7	1	8	1	1	2	3	-	3
5. With cerebral syphilis	-	-	-	-	-	-	-	-	-	-	1	1
6. With Huntington's chorea	-	-	-	1	-	1	-	-	-	-	-	-
7. With brain tumor	-	-	-	-	-	-	1	-	1	-	-	-
8. With other brain or nervous diseases	-	1	1	-	-	-	-	-	-	-	-	-
9. Alcoholic	-	-	-	-	-	-	-	1	1	-	-	-
10. Due to drugs and other exogenous toxins	-	-	-	-	-	-	-	-	-	-	-	-
11. With pellagra	-	-	-	-	-	-	-	-	-	-	-	-
12. With other somatic diseases	-	-	-	-	1	1	-	-	-	-	-	-
13. Manic-depressive	-	-	-	-	3	3	-	2	2	1	5	6
14. Involution melancholia	-	-	-	-	-	-	-	-	-	-	-	-
15. Dementia præcox	-	-	-	1	2	3	-	6	6	3	6	9
16. Paranoia or paranoid conditions	-	-	-	-	1	1	-	-	-	-	-	-
17. Epileptic psychoses	-	-	-	-	1	1	-	-	-	1	-	1
18. Psychoneuroses and neuroses	-	-	-	-	-	-	-	-	-	-	-	-
19. With psychopathic personality	-	-	-	-	-	-	-	-	-	-	-	-
20. With mental deficiency	-	-	-	1	-	1	-	-	-	-	1	1
21. Undiagnosed psychoses	-	-	-	-	3	3	-	-	-	-	-	-
22. Without psychosis	-	-	-	-	-	-	-	-	-	-	-	-
Total	10	9	19	13	16	29	8	13	21	11	18	29

TABLE 18.— *Total Duration of Hospital Life of Patients dying in Hospital classified according to Principal Psychoses for the year ending September 30, 1924—Concluded.*

PSYCHOSES			16-19 YEARS			20 YEARS AND OVER		
	M.	T.	M.	F.	T.	M.	F.	T.
1. Traumatic	-	-	-	-	-	-	-	-
2. Senile	-	-	-	-	-	-	-	-
3. With cerebral arteriosclerosis	-	-	-	-	-	-	-	-
4. General paralysis	-	-	-	-	-	-	-	-
5. With cerebral syphilis	-	-	-	-	-	-	-	-
6. With Huntington's chorea	-	-	-	-	-	-	-	-
7. With brain tumor	-	-	-	-	-	-	-	-
8. With other brain or nervous diseases	-	-	-	-	-	-	-	-
9. Alcoholic	-	1	-	-	-	1	-	1
10. Due to drugs and other exogenous toxins	-	-	-	-	-	-	-	-
11. With pellagra	-	-	-	-	-	-	-	-
12. With other somatic diseases	-	-	-	-	-	-	-	-
13. Manic-depressive	-	1	-	-	-	1	-	1
14. Involution melancholia	-	-	-	-	-	-	-	-
15. Dementia præcox	-	1	2	2	4	3	4	7
16. Paranoia or paranoid conditions	-	-	-	-	-	-	-	-
17. Epileptic psychoses	-	-	-	-	-	-	-	-
18. Psychoneuroses and neuroses	-	-	-	-	-	-	-	-
19. With psychopathic personality	-	-	-	-	-	-	-	-
20. With mental deficiency	-	-	-	-	-	-	-	-
21. Undiagnosed psychoses	-	-	-	-	-	-	-	-
22. Without psychosis	-	-	-	-	-	-	-	-
Total	-	3	2	2	4	5	4	9

TABLE 19.— *Family Care.*

	M.	F.	T.
Remaining Sept. 30, 1923	-	16	16
Admitted	-	5	5
Whole number within year	-	21	21
Dismissed	-	3	3
Returned to institution	-	3	3
Discharged	-	-	-
Died	-	-	-
On visit	-	-	-
On escape	-	-	-
Remaining Sept. 30, 1924	-	18	18
State	-	14	14
Private	-	4	4
Self-supporting	-	-	-
Daily average number	-	16.60	16.60
State	-	12.85	12.85
Private	-	3.75	3.75
Self-supporting	-	-	-

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